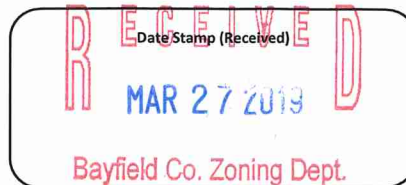


SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR SIGN  
BAYFIELD COUNTY, WISCONSIN



Permit #:	19-0045
Date:	4-3-19
Amount Paid:	\$50 3-27-19
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.  
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Property Owner(s) Name: <u>Jody Hipsher</u>	Mailing Address: <u>22450 Siskiwit Lk Rd</u>	City/State/Zip: <u>Cornucopia WI 54827</u>	Phone: <u>715-209-5322</u> <u>715-742-3495</u>
Sign Owner(s) Name: <u>same</u>	Mailing Address: <u>same</u>	City/State/Zip: <u>same</u>	Phone: <u>same</u>
Address of Property: <u>88528 Superior Ave</u>	City/State/Zip: <u>Cornucopia WI 54827</u>		
Contractor:	Contractor Phone:	Address:	
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone:	Agent Mailing Address (include City/State/Zip):	Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No

PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID: (4 or 5 digits) <u>8145</u>	Recorded Document: (i.e. Property Ownership) Volume <u>2018 R</u> Page(s) <u>574972</u>
<u>1/4</u> , <u>1/4</u>	Gov't Lot	Lot(s)	CSM
			Vol & Page
		Lot(s) No. <u>7-12</u>	Block(s) No. <u>6</u>
Section <u>34</u> , Township <u>51</u> N, Range <u>6</u> W		Town of: <u>Bell</u>	
		Lot Size <u>.43</u>	Acreage

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion <small>* include donated time &amp; material</small>	✓	Project (What are you applying for)	Type	Length	Width	Height	Located in Town of Bayfield
\$ <u>500-</u>	<input checked="" type="checkbox"/>	On-Premise	<input checked="" type="checkbox"/> New	<input checked="" type="checkbox"/> 1-Sided	<u>8'</u>	<u>18'</u>	<u>18'</u>
	<input type="checkbox"/>	Off-Premise	<input type="checkbox"/> Replacement	<input type="checkbox"/> 2-Sided			
	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/> On-Building			
	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/> Multi-Tenant			

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Matt + Jody Hipsher  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 4-24-19

Applicant(s): Matt + Jody Hipsher  
(If you are applying for an Off-premise sign, the property owners must also sign this form)

Date 4-24-19

Authorized Agent: \_\_\_\_\_  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date \_\_\_\_\_

Address to send permit 22450 Siskiwit Lk Rd Cornucopia WI 54827

Attach

Copy of Tax Statement

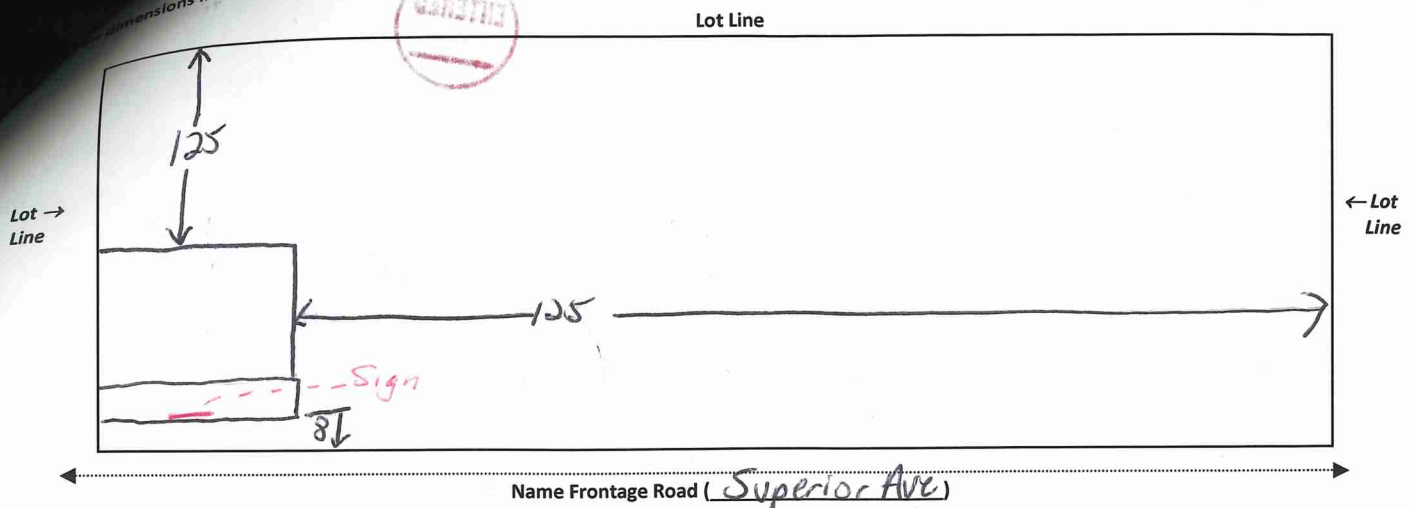
If you recently purchased the property send your Recorded Deed

PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
The local Town, Village, City, State or Federal agencies may also require permits.

Use frontage road as a guideline, and indicate North (N) on plot plan  
 dimensions in feet on the following:

**IMPORTANT**  
**Detailed Plot Plan is Necessary**



Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	48 Feet	Setback from the North Lot Line	0 Feet
Setback from the Established Right-of-Way	8 Feet	Setback from the South Lot Line	125 Feet
		Setback from the West Lot Line	8 Feet
Setback from Lake, River, Stream or Pond	= Feet	Setback from the East Lot Line	125 Feet
Setback from Other Sign(s)	= Feet		

Sign Plan  
 (Fill in Information Desired on Sign)

Siskowit Farmhouse LLC

Issuance Information (County Use Only)		Permit Number: 19-0045	Permit Date: 4-3-19
Permit Denied (Date):		Reason for Denial:	
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:	
Was Parcel Legally Created Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Inspection Record: Pre-existing building in commercial zoning district. Sign location and size is code compliant.		Zoning District ( C ) Lakes Classification ( — )	
Date of Inspection: 3/29/19	Inspected by: Todd Norwood	Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.) Install sign per provided dimensions and plot plan.			
Signature of Inspector: Todd Norwood			Date of Approval: 4/2/19



City, Village, State or Federal  
May Also Be Required

AND USE – **X**  
SANITARY – **City**  
SIGN – **On-premise**  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **19-0045** Issued To: **Matthew & Jody Hipsher**

Location: -  $\frac{1}{4}$  of -  $\frac{1}{4}$  Section **34** Township **51** N. Range **6** W. Town of **Bell**

Gov't Lot Lot **7-12** Block **6** Subdivision **Village of Cornucopia** CSM#

For: **Commercial Other: [ on- premise; sign (8' x 18" x 18" high) ]**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s):** **Install sign per provided dimensions and plot plan.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Todd Norwood**

Authorized Issuing Official

**April 3, 2019**

Date